



EV 183649023

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2/6/03  
PATENT

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

The application of: Georges, William D.; Lamson, Stephen B.; Leek, William F.; and Powell, Gregory S.

Application No.: 09/698,382      Group No.: 3632  
Filed: 10/27/2000      Examiner: Brann, Deborah  
For: STRAP TIE HOLDER

**Commissioner for Patents**  
**Washington, D.C. 20231**

**AMENDMENT TRANSMITTAL**

- Transmitted herewith is an amendment for this application.

**STATUS**

- Applicant is other than a small entity.

**EXTENSION OF TERM**

- The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)(1)-(4)) for one month:

Fee: \$110.00

**FEE FOR CLAIMS**

- The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

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**CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. 1.8(a))**

I hereby certify that, on the date shown below, this correspondence is being:

**MAILING**

deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Commissioner for Patents, Washington, D.C. 20231.

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**Signature**

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(Amendment Transmittal--page 1 of 2)

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3632

Practitioner's Docket No. SST/1061

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Examiner: Brann, Deborah

For: STRAP TIE HOLDER

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EXPRESS MAIL CERTIFICATE

"Express Mail" label number EV 183649023

Date of Deposit ~~01/28/2002~~ 01/28/2003 1/28/03

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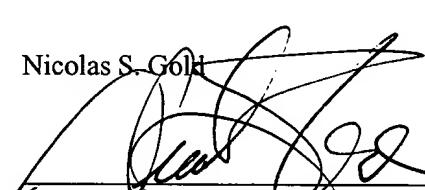
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Amendment Transmittal (2pgs)

Amendment (4pgs)

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Nicolas S. Gold

  
Signature of person mailing paper or fee

**EV183649023**

OTHER THAN A SMALL ENTITY					
(Col. 1) Claims Remaining After Amendment	(Col. 2) Highest No. Previously Paid For	(Col. 3) Present Extra	Rate	Addit. Fee	
Total	20	Minus	21	= 0	x \$18 = \$0
Indep.	1	Minus	3	= 0	x \$84 = \$0
First Presentation of Multiple Dependent Claim				+ \$280 =	\$0
			Total	Addit. Fee	\$0

- \* If the entry in Col. 1 is less than the entry in Col. 2, write "O" in Col. 3.
- \*\* If the "Highest No. Previously Paid For" IN THIS SPACE (Column 2, Row 1) is less than 20, enter "20".
- \*\*\* If the "Highest No. Previously Paid For" IN THIS SPACE (Column 2, Row 2) is less than 3, enter "3".
- The "Highest No. Previously Paid For" (Total or Indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

No additional fee for claims is required.

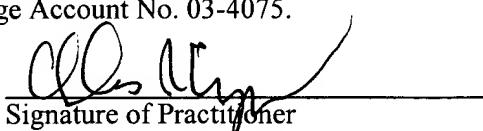
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#### **FEE DEFICIENCY**

6. If any additional extension and/or fee is required, charge Account No. 03-4075.  
If any additional fee for claims is required, charge Account No. 03-4075.

Date: 1/28/03



Signature of Practitioner

Reg. No.: 41694  
Tel. No.: 1-510-832-4111  
Customer No.: 498

Charles R. Cypher  
Law Offices of James R. Cypher  
405 14th Street, Suite 1607  
Oakland, CA 94612-2777